01/03

Division of Corporations Electronic Filing Cover Sheet

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(((H140001070343)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : 120000000205

Phone

: (305)416-6800

Fax Number

: (305)416-6811

## LLC DISSOLUTION OR WITHDRAWAL BRICKELL APARTMENTS USA LLC

Certificate of Status	0
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MAY - 6 2013

T. HAMPTON

## **COVER LETTER**

	vision of Corporations		•		
SUBJECT	Brickell Apartments USA, LLC				
SUBJECT	(Name of Limit	ed Liability Compan	у)		
The enclose	ed Articles of Dissolution and fee(s) are submitt	ed for filing.			
Please retui	rn all correspondence concerning this matter to	the following:			
	Diane M. Hernandez				
	(Nan	ne of Person)			
	Adams Gallinar, P.A.				
	(Firm/Company)				
1000 Brickell Avenue, Suite 300					
		(Address)			
	Miami, Florida 33131				
	(City/Sta	nte and Zip Code)			
For further	information concerning this matter, please call;				
Ε	Diane M. Hernandez	305	416-6800		
_	(Name of Person)	(Area Co	de & Daytime Telephone Number)		
Enclosed is	a check for the following amount:				
\$2	5.00 Filing Fee and Certificate of Dissolution		g Fee, Certificate of Dissolution & opy (additional copy is enclosed)		
	MAILING ADDRESS:	STRI	EET/COURIER ADDRESS:		
	Registration Section	Registration Section			
	Division of Corporations P.O. Box 6327		ion of Corporations on Building		
	Tallahassee, FL 32314		Executive Center Circle		

Tallahassee, FL 32301

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ADAMS GALLINAR PA PAGE 03/03 H14000107034

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Brickell Apartments USA, LLC	
2.	The Articles of Organization were filed on 11/29/2011 and assigned	
	document number <u>L11000134751</u>	
3.	The delayed effective date the dissolution if not effective on the date of filing:  (effective date cannot be prior to or more than 90 days later than date document is received for filing)	
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  No Activity.	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	·
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:	
	Robert R. Adams, Auth. Representative Printed Name Printed Name	77
	FILING FEE: \$25.00  HASSEE, FLORIE	LED